### STATE OF UTAH, DEPARTMENT OF ENVIRONMENTAL QUALITY, DIVISION OF WATER QUALITY

195 North 1950 West, P.O. Box 144870, Salt Lake City, Utah 84114-4870 (801)536-4300

Submission of this Notice of Intent constitutes notice that the party identified in the first block (below) of this form intends to be authorized by UPDES General Permit No. UTG790000, issued for discharges of treated ground water to surface waters in the State of Utah. Coverage of this permit obligates such discharger to comply with the terms and conditions of the permit.

PLEASE PROVIDE ALL REQUIRED INFORMATION

THIS BO	X FOR D	IVISION OF	WATER QUA	LITY	USE O	NLY	
COVERAGE NUMBER: UT	G07	_ COVERAG	GE DATES: _	/	/20	_TO	//20
RECEIVING WATER:			CLAS	SIFICA	ATION:		
EFFLUENT LIMITATIONS	BASED (	ON PERMIT A	Part I.D. OF	R <i>I.E</i> .			
ADDITIONAL MONITORIN	G AND/C	OR EFFLUEN	T LIMITATI	ONS: _			
DIVISION PERMIT OF COV	ERAGE	ISSUANCE:					
SIGNATURE://_2	0 SI	IGNATURE:					
Once coverage is assigned discl	narge mon	itoring reports	will be generat	ted and	provide	d to the o	perator.
1. Contact Information	(used fo	r permit cor	respondence)	)			
Permitee Company Name:							
Permitee Contact Name:							
Permitee Contact Phone:							
Permitee Contact Email:							
Mailing Address:							
Mailing Address 2:							
Mailing City:							
Mailing State:							
Mailing Zip Code:							

2.	Owner	
Owne	er/Manager Name:	
Owne	er/Manager Phone	
Owne	er/Manager Email:	
Legal	Status of Owner/	Operator:
Proje	ct Name:	
3.	Project Site Lo	ocation
Proje	ct Street Address:	
(if ad	dress is not availal	ple Lat/Long must be provided)
Proje	ct Address 2:	
Proje	ct City:	
Proje	ct County:	
Proje	ct State:	Utah
Proje	ct Zip Code:	
Proje	ct Site Phone:	(
List t	he Latitude and Lo	ongitude of the project location in <b>degree decimal</b> :
Proje	ct Lead	
Proje	ct Lead Name:	
Proje	ct Lead Phone:	
4.	Site Description	n
conta	mination and any	site, including a description of the source(s) of contamination and the extent of additional contamination anticipated in the local ground water from other possible

#### **5. Map**

**Project Dates** 

6.

Attach a topographical map of the area extending to at least 1 mile beyond the property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its waste treatment, storage, or disposal facilities, and discharge locations. Include all springs, rivers, and other surface water bodies in the map.

	/	/ 20	
		/_20	
Project Completion Date:	/	/_20	
7. Discharge Location(s)			
List the Latitude and Longitude	of the Discharge F	Point(s) in degree decima	ıl:
1)		2)	
3)		4)	
Is the project located on tribal la	nds?		Yes / No
If the facility is located on Triba on the Navajo Reservation or on region IX.	•	•	*
Does the discharge flow into a s	torm drain before	entering the receiving wa	ter body? Yes / No
Be Advised: Discharges to storn	n drains must be ap	oproved by the storm dra	in authority/owner.
Be Advised: Discharges to storn  Description of Discharge location			in authority/owner.

8. Receiving Water	
Receiving Water Body Name:	
Are any of the discharge points located in the Colorado River Basin?	
Yes / No	
9. Receiving Water Designated Uses	
Does the receiving water designated uses include Class 1C drinking water as defined by R317-2-13? Class 1C waters are "Protected for domestic purposes with prior treatment by treatment processes as required by the Utah Division of Drinking Water"	
Yes / No	
10. Influent and Effluent Concentrations	
Complete attached Table A and list any additional pollutants (not included in Table A) with influent a effluent concentrations here:	ınd
Discharge <b>IS</b> to Class 1C Water:  1. In addition to completing Table A influent sampling including total toxic organics (TTO) results in	

- 1. In addition to completing Table A, influent sampling including total toxic organics (TTO) results must be attached. See attached Table B for list of TTO constituents. No permits for discharge to Class 1C Waters will be issued prior to influent sampling being conducted and results received.
- 2. An analysis of alternative disposal methods of the treated ground water must be attached. This analysis must include an economic comparison of the alternative disposal methods. If no other disposal methods are feasible the analysis must demonstrated the consideration of other methods such as trucking and/or discharge to a treatment facility.
- 3. If the project will last longer than one year DWQ may require Level II Antidegradation review be conducted. Please contact DWQ Staff for further information.

Discharge is **NOT** to Class 1C Water:

- 1. In addition to completing Table A, influent sampling including total toxic organics **OR** a report documenting why influent sampling is not needed for this project and an estimation of anticipated influent constituent concentrations.
- 2. In accordance with *Part I.E.* the permittee may petition Total Petroleum Hydrocarbon (TPH-GRO and TPH-DRO) analyses may be substituted for the TTO analyses. If approved Maximum Daily Effluent Limitations of 1.0 mg/L TPH-GRO and TPH-DRO will be substituted for the TTO effluent limitation.

#### 11. Description of Treatment System

Description of the current or proposed treatment system, including discharge flow rate (attach a flo	)W
diagram):	

#### 12. Certification and Signature

This application must be signed by the owner, operator, or authorized representative of the facility. Refer to *Part IV.G*, *Signatory Requirements*, of the General Permit.

Mail to: Division of Water Quality

Department of Environmental Quality

P.O. Box 144870

Salt Lake City, Utah 84114-4870

I certify under penalty of law that this submission was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the applicant has sufficient title, right or interest in the property where the proposed activity occurs.

Signature:	 
Date:	 
Signatory Title:	

#### 13. Please be advised of the following:

- a. You may need to file for a temporary application to appropriate water rights from the Division of Water Rights. Call (801) 538-7240 for more information.
- b. You may need to obtain approval from the Division of Air Quality if any air stripping equipment is to be employed at the cleanup site. Call (801) 536-4000 for more information.

#### **Table A**

#### **Analysis of Treatment System Influent and Effluent**

You must report concentrations for each pollutant listed. Please refer to Part I.D and I.E of the permit or NOI to determine if actual influent values are required or if estimated values will be accepted.

estimated

estimated

or

or

actual

actual

Are influent values:

Are effluent values:

TTO's\*

(attach full list if required)

		Influent		Effluent			
Parameters	Avg.	Max.	No. of	Avg.	Max.	No. of	
	(mg/L)	(mg/L)	Samples	(mg/L)	(mg/L)	Samples	
pH (range in standard units)							
Total Suspended Solids							
Total Dissolved Solids							
Total Lead							
Oil & Grease							
Benzene							
Toluene							
Ethylbenzene							
Xylenes							
Naphthalene							
MTBE							

<sup>\*</sup>The permittee must analyze for all the priority toxic organics (See Table A) likely to be present in concentrations greater than 0.01 mg/L. Attach the complete TTO analysis indicating parameters sampled and their reported concentrations.

### TABLE B

#### **Total Toxic Organic List** \*

ACROLEIN PHENOL HEXACHLOROCYCLOPENTADIENE ACRYLONITRILE 2,4,6-TRICHLOROPHENOL HEXACHLOROETHANE **ACENAPHTHENE** INDENO(1,2,3-CD)PYRENE BENZENE ACENAPHTHYLENE **BROMOFORM** ISOPHORONE CARBON TETRACHLORIDE ANTHRACENE NAPTHALENE CHLOROBENZENE BENZIDINE NITROBENZENE CHLORODIBROMOMETHANE BENZO(A)ANTHRACENE N-NITROSODIMETHYLAMINE BENZO(A)PYRENE N-NITROSODI-N-PROPYLAMINE CHLOROETHANE 2-CHLOROETHYLVINYL ETHER 3,4-BENZOFLUORANTHENE N-NITROSODIPHENYLAMINE BENZO(GHI)PERYLENE CHLOROFORM PHENANTHRENE DICHLOROBROMOMETHANE BENZO(K)FLUORANTHENE PYRENE 1,1-DICHLOROETHANE BIS(2-CHLOROETHOXY)METHANE 1.2.4-TRICHLOROBENZENE 1,2-DICHLOROETHANE BIS(2-CHLOROETHYL)ETHER ALDRIN 1.1-DICHLOROETHYLENE BIS(2-CHLOROISOPROPYL)ETHER ALPHA-BHC 1.2-DICHLOROPROPANE BIS (2-ETHYLHEXYL)PHTHALATE BETA-BHC 1.3-DICHLOROPROPYLENE 4-BROMOPHENYL PHENYL ETHER GAMMA-BHC **ETHYLBENZENE** BUTYLBENZYL PHTHALATE DELTA-BHC METHYL BROMIDE 2-CHLORONAPHTHALENE **CHLORDANE** 4-CHLOROPHENYL PHENYL METHYL CHLORIDE 4,4'-DDT METHYLENE CHLORIDE **ETHER** 4,4'-DDE 1,1,2,2-TETRACHLOROETHANE **CHRYSENE** 4,4'-DDD DIBENZO(A,H)ANTHRACENE TETRACHLOROETHYLENE DIELDRIN 1,2-DICHLOROBENZENE ALPHA-ENDOSULFAN **TOLUENE** 1.2-CIS.TRANS-1.3-DICHLOROBENZENE BETA-ENDOSULFAN DICHLOROETHYLENE 1,4-DICHLOROBENZENE ENDOSULFAN SULFATE 1.1.1-TRICHLOROETHANE 3.3'-DICHLOROBENZIDINE **ENDRIN** 1,1,2-TRICHLOROETHANE DIETHYL PHTHALATE ENDRIN ALDEHYDE TRICHLOROETHYLENE DIMETHYL PHTHALATE **HEPTACHLOR** VINYL CHLORIDE DI-N-BUTYL PHTHALATE HEPTACHLOR EPOXIDE 2-CHLOROPHENOL 2.4-DINITROTOLUENE PCB-1242 2,4-DICHLOROPHENOL 2,6-DINITROTOLUENE PCB-1254 DI-N-OCTYL PHTHALATE 2,4-DIMETHYLPHENOL PCB-1221 4,6-DINITRO-O-CRESOL 1,2-DIPHENYLHYDRAZINE (AS PCB-1232 2,4-DINITROPHENOL AZOBENZENE) PCB-1248 2-NITROPHENOL FLURORANTHENE PCB-1260 4-NITROPHENOL FLUORENE PCB-1016 TOXAPHENE P-CHLORO-M-CRESOL HEXACHLOROBENZENE PENTACHLOROPHENOL HEXACHLOROBUTADIENE

<sup>\*</sup> These are the parameters that shall be analyzed for initially determining the total toxic organic (TTO) concentration of the wastewater.